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CONFIRMATION NO. 2996

Bib Data Sheet

SERIAL NUMBER 09/826,578	FILING DATE 04/05/2001 RULE	CLASS 709	GROUP ART UNIT 2155	ATTORNEY DOCKET NO. 782.03
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/01/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	TX	DRAWING 4	CLAIMS 18	CLAIMS 2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

SYSTEM AND METHOD FOR COMMUNICATION FOR A SUPERVISORY CONTROL AND DATA ACQUISITION (SCADA) SYSTEM

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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